## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10-670-555

|   |   |   | 10-670-555       |                               |              |  |        |                     |                        |         |                     |                        |
|---|---|---|------------------|-------------------------------|--------------|--|--------|---------------------|------------------------|---------|---------------------|------------------------|
| ,   |   | CLAIMS AS                                 | (Column 1)       |                               | (Column 2)   |  |        | SMALL EN            | ITITY                  | OR      | OTHER<br>SMALL      |                        |
| TOTAL CLAIMS  |   |   | 20               |                               |              |  |        | RATE                | FEE                    |         | RATE                | FEE                    |
| FOR   |   |   | NUMBER FILED     |                               | NUMBER EXTRA |  |        | BASIC FEE           | 375.00                 | OR      | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |   | 20 minus 20=     |                               | * 0          |  |        | X\$ 9=              |                        | OR      | X\$18=              |                        |
| INDEPENDENT CLAIMS  |   |   | 3 minus 3 =      |                               | * 0          |  |        | X42=                |                        | OR      | X84=                |                        |
| MU  | LTIPLE DEPEN  | RESENT                                    |                  |                               |              |  | +140=  |                     | OR                     | +280=   |                     |                        |
| * If the difference in column 1 is less than zero, enter  |   |   |                  |                               | r "0" in c   | olumn 2                                      |        | TOTAL               |                        | OR      | TOTAL               | 750                    |
| CLAIMS AS AMENDED - PART II   |   |   |                  |                               |              |  |        | TOTAL               |                        | Jon     | OTHER               |                        |
|   |   | (Column 1)                                |                  | (Colur                        | mn 2)        | n 2) (Column 3)                              |        | SMALL               | ENTITY                 | OR      | SMALL               |                        |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA                             |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus            | **                            |              | =  |        | X\$ 9=              |                        | OR      | X\$18=              |                        |
|   | Independent   | *   | Minus            | ***                           |              | <u>                                     </u> |        | X42=                |                        | OR      | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                  |                               |              |  |        | +140=               |                        | OR      | +280=               |                        |
|   |   |   |                  |                               |              |  |        | TOTAL<br>ADDIT. FEE |                        | OR      | TOTAL<br>ADDIT, FEE |                        |
|   |   | (Column 1)                                | ADDII: 1 EE      |                               |              | / DOTT. 1 C.C.                               |        |                     |                        |         |                     |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA                             |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus            | **                            |              | =  |        | X\$ 9=              |                        | OR      | X\$18=              |                        |
|   | Independent   | *   | Minus            | ***                           | 5 61 1114    | ]=   | 4      | X42=                |                        | OR      | X84=                |                        |
| <u> </u>  | FIRST PRESE   | NTATION OF M                              | ULTIPLE DE       | ENDEN                         | CLAIM        |  | J      | +140=               |                        | OR      | +280=               |                        |
|   |   |   |                  |                               |              |  |        | TOTAL<br>ADDIT, FEE |                        | OB.     | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)  |   |   |                  |                               |              |  |        | ADDII. I EL I       |                        |         | ADDIT: PEC          |                        |
| AMENDMENT C   | ,   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | PREVI                         | IBER         | PRESENT<br>EXTRA                             |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus            | **                            |              | =  |        | X\$ 9=              |                        | OR      | X\$18=              |                        |
|   | Independent   | *   | Minus            | ***                           |              | ]=   | 11     | X42=                |                        | OR      | X84=                |                        |
| الم   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                  |                               |              |  |        | +140=               |                        |         | +280=               |                        |
|   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                  |                               |              |  |        |                     |                        | OR      | +280=<br>TOTAL      |                        |
| ** If the entry in column 1 is less than the entry in column 2, write 0 in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                  |                               |              |  |        |                     |                        |         |                     | l                      |
|   | rne mignest Nun   | iber Previously Pa                        | ud ror" (Total o | r independ                    | ient) is the | nignest numb                                 | er tou | ına ın the apţ      | propriate box          | k in co | iumn 1.             |                        |